



Office of the Secretary
PO Box 94245 | Baton Rouge, LA 70804-9245
ph: 225-379-1200 | fx: 225-379-1851

John Bel Edwards, Governor
Shawn D. Wilson, Ph.D., Secretary

TRANSPORTATION NETWORK COMPANY
CONDITIONAL OPERATIONAL PERMIT APPLICATION

Required Attachments:

- Certificate of Insurance
- Certificate of Good Standing with the Louisiana Secretary of State
- Zero Tolerance Policy
- Driver Criminal Background Check Information
- Driver Motor Vehicle Records
- Non-Discrimination Policy
- Driver Cannot Accept Cash Payment Policy

Type of Application:

Check one: Initial Renewal

APPLICANT INFORMATION

Primary Contact Name: _____ Primary Contact Phone: _____

Business Name: _____

Trade Name of DBA: _____

Business Address: _____

City: _____ State: _____ Zip: _____

Business Phone: _____ Email: _____

EIN#: _____

Proposed Municipalities for Operation: _____

AGENT FOR SERVICE OF PROCESS

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

ACKNOWLEDGMENTS

TNC CONDITIONAL OPERATIONAL PERMIT

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I represent that the information contained in this application is true and correct. I understand that the Louisiana Department of Transportation and Development may deny this application based upon misrepresentation, alteration, omission, incompleteness of material fact, or for any reason set forth in LA. R.S. 48:2191 et seq. Additionally, I understand that the issuance of this permit is considered conditional until such time the department promulgates rules and regulations concerning the operations of transportation network companies, at that time I must re-apply for a permit subject to those rules and regulations.

Authorized Applicant Signature: _____

Date: _____

Approver: _____

Date: _____

Title: _____

